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Transmittal Form w/ Declaration

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|--|--|---|-------------------|----------|--------------|
| UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b)) | Attorney Docket No. | NKS-002 | Total Pages | | |
| | First named Inventor or Application Identifier | | Katsuhiro HIEJIMA | | |
| | Title of Invention | | MEDICAL VALVE | | |
| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | | ADDRESS TO: Commissioner for Patents Box Patent Application Alexandria, VA 22313-1450 | | | |
| <p>1. <input checked="" type="checkbox"/> Fee Transmittal Form</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages <u>41</u>]</p> <ul style="list-style-type: none">- Descriptive title of the Invention- Cross References to Related Applications- Statement Regarding Fed sponsored R & D- Reference to Microfiche Appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure <p>3. <input checked="" type="checkbox"/> Formal Drawings (35 USC 113) [Total Sheets <u>12</u>]</p> <p>4. <input checked="" type="checkbox"/> Oath or Declaration [Total pages <u>3</u>]</p> <ul style="list-style-type: none">a. <input checked="" type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below]i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p> | | <p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <ul style="list-style-type: none">a. <input type="checkbox"/> Computer Readable Copyb. <input type="checkbox"/> Paper Copy (identical to computer copy)c. <input type="checkbox"/> Statement verifying identity of above copies <p>ACCOMPANYING APPLICATION PARTS</p> <p>8. <input checked="" type="checkbox"/> Assignment papers (cover sheet & document)</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (When there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO-1449 <input type="checkbox"/> Copies of IDS Citations (* docs)</p> <p>12. <input checked="" type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>14. <input type="checkbox"/> Assertion to Entitlement to Small Entity Status <input type="checkbox"/> Assertion filed in prior application, status still proper and desired</p> <p>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document <input checked="" type="checkbox"/> Priority of application No. 2003-071260 filed on March 17, 2003, in Japan is claimed under 35 USC 119. <input type="checkbox"/> The certified copy has been filed in prior application Serial No. *.</p> <p>16. <input type="checkbox"/> Other: _</p> <p>OTHER</p> <p>17. <input type="checkbox"/> Priority of _ Patent Application No. _ filed _ is claimed under 35 USC 119.</p> | | | |
| 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in part (CIP) of prior application No.: _ | | | | | |
| 19. CORRESPONDENCE ADDRESS | | | | | |
| <input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>020374</u> or <input type="checkbox"/> Correspondence address below | | | | | |
| NAME | KUBOVCIK & KUBOVCIK | | | | |
| ADDRESS | 900 17th Street, N.W. | | | | |
| CITY | Washington | STATE | DC | ZIP CODE | 20006 |
| FILING DATE | March 16, 2004 | TEL | 202-887-9023 | FAX | 202-887-9093 |


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|---|------------------------|-------------------|
| FEE TRANSMITTAL Note: Effective October 1, 2003 | Application Number | Not Yet Assigned |
| | Filing Date | March 16, 2004 |
| | First Named Inventor | Katsuhiro HIEJIMA |
| | Group Art Unit | Not Assigned |
| | Examiner Name | Not Assigned |
| | Attorney Docket Number | NKS-002 |

| CLAIMS AS FILED-PART 1 | | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
|--|--------------|--------------|--------------|----------|-------------------------|------------|
| FOR | NUMBER FILED | NUMBER EXTRA | RATE | FEE | RATE | FEE |
| BASIC FEE (37 CFR 1.16 (a)) | | | | \$385.00 | | \$770.00 |
| TOTAL CLAIMS (37 CFR 1.16 (c)) | 14 - 20 = | | \$9.00 | | \$18.00 | \$0.00 |
| INDEPENDENT CLAIMS (37 CFR 1.16 (B)) | 6 - 3 = | 3 | \$43.00 | | \$86.00 | \$258.00 |
| MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16 (d)) | | | \$145.00 | | \$290.00 | |
| | | | SUB TOTAL | | SUB TOTAL | \$1,028.00 |
| SURCHARGE-LATE FILING FEE OR DECLARATION | | | \$65.00 | | \$130.00 | |
| RECORDING ASSIGNMENT | | | \$40.00 | | \$40.00 | \$40.00 |
| TOTAL | | | | \$0.00 | | \$1,068.00 |

| METHOD OF PAYMENT (check one) | | | |
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| 1. <input checked="" type="checkbox"/> The commissioner is hereby authorized to credit overpayments or charge insufficiencies to: | | 2. <input checked="" type="checkbox"/> Payment Enclosed: | |
| DEPOSIT ACCOUNT No. | 111833 | <input checked="" type="checkbox"/> Check (# <u>5964</u> for \$ <u>1,068.00</u>) <input type="checkbox"/> Money Order <input type="checkbox"/> Other | |
| DEPOSIT ACCOUNT NAME | KUBOVCIK & KUBOVCIK | | |

| SIGNATURE OF ATTORNEY, OR AGENT | | | |
|---------------------------------|---|------------------|--|
| NAME | Keiko Tanaka Kubovcik | REGISTRATION No. | 40,428 |
| SIGNATURE |  | ADDRESS | KUBOVCIK & KUBOVCIK 900 17th Street, N.W. Washington, D.C. 20006 |
| | | TELEPHONE | 202-887-9023 |
| DATE | March 16, 2004 | FAX | 202-887-9093 |

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